

The purpose of this e-mail is to comment on the "interim rule" regarding Pre-Release Community Confinement. 28 CFR Part 570. Department of Justice, Bureau of Prisons.

My name is Michael Smith and I am currently a third-year law student at the University of Denver Sturm College of Law. I have prior professional experience as a mental health clinician in psychiatric and residential treatment centers. I have also worked as an intern in a state prison facility providing mental health services to inmates. Finally, I have conducted psychological research in a forensic psychiatric setting.

The Second Chance Act is a positive step forward towards helping inmates reenter the community setting. Even with the services provided while incarcerated inmates face enormous challenges upon returning to the community setting. The goals of incarceration are thwarted when inmates are simply let go from prison without a system of care to help with the transitions.

Charged with the implementation of the Act, the Bureau of Prisons is properly adjusting its rules and definitions to accommodate this process in this interim rule. Specifically, the broadening of the term "community confinement" should allow more flexibility for judges, probation officers, social workers and other community service providers to identify appropriate services for inmates upon release from prison.

In my experience, a major problem in identifying services was not because of a lack of support, but primarily because of a lack of access to the support needed. In other words, putting more control in the hands of those who are working directly with an inmate will increase efficiency in getting proper placement, and the broader scope of the term "community confinement" appears to accomplish this goal.

Those with experience in the mental health field understand that the critical factor is often timing and efficiency of services and not necessarily efficacy. Delays in getting access to services can often present stress to inmates at a particularly vulnerable time. One concern with the interim rule, however, is that it could be construed too broadly. Inmates need highly individualized care that can be tailored to vocational, psychiatric, educational, medical, or other kinds of needs. In my experience, community service providers-for understandable reasons-often attempt to help in areas they are not qualified in. For example, I have worked with case management agencies in the past that billed themselves as "comprehensive" in their services. However, this is often merely a marketing tool to get clients and hence reimbursement for services. The Bureau should be particularly scrutinizing of those community agencies that

attempt to get on the list of service providers for inmates returning to the community.

Sincerely,

Michael L. Smith